



The information in this facsimile is confidential and is intended for the sole use of the addressee designated below. If this facsimile has been misdirected, kindly return it by postal service to Gilead Sciences, Inc. If you do not receive all pages clearly, please telephone (650) 522-5535.

GILEAD SCIENCES, INC.

333 Lakeside Drive

Foster City, California 94404

Telephone: 650/522-5535 or 650/574-3000

Telefacsimile: 650/522-5899

Date:

April 21, 1999

Telefax: (703) 308-4556

To:

Assistant Commissioner

for Patents

Washington, D.C. 20231

Re: In re application of: Arimilli et al

Serial No.: 09/187,763

Filed: November 6, 1998

Attorney Docket No. 221.P1C

Group No. 1613

Examiner: M. Ambrose

Antiviral Phosphonomethoxy Nucleotide Analogs

Having Increased Oral Bioavailability

From:

Max D. Hensley, Reg. 27,043

Total Number of Pages Including Cover Sheet:

Certification of Facsimile Transmission

I hereby certify that this paper along with the following documents are being facsimile transmitted to the Patent and Trademark Office and that the original documents are being deposited with the United States Postal Service as first class mail in an envelope addressed to the Assistant Commissioner for Patents, Washington, D.C. 20231 on the date shown below.

Amendment Transmittal Amendment

Terminal Disclaimer

Rob	nic	To	rr	es

Robin Joses

Type or print name of person signing certification

vil 21, 1999

04/21/99 WED 19:16 [TX/RX NO 7310] 2001

APR 22 1999





IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re applica	tion of: Arimilli et al					
Serial No.:	09/187,763	Group No.:	1614			
Filed:	November 6, 1998	Examiner:	M. Ambrose			
For:	Antiviral Phosphonomethox Having Increased Oral Bioa		Analogs			
Assistant C	Commissioner for Patents					
Washington	n, D.C. 20231					
	AMEN	IDMENT	TRANSMITTAL			
1. Tre	Transmitted herewith is an amendment for this application.					
		STA	TUS			
2. Applica	nt is					
	a small entity - verified stater	ment:				
[attached.					
	already filed.					
×	other than a small entity.					
			ILING (37 CFR 1.8 (a))			
with the Unit	ted States Postal Service on t	he date show	erred to as being attached or enclosed) is being deposited on below with sufficient postage as first class mail in an attents, Washington, D.C. 20231.			
			Robin Torres			
			(Type or print name of person mailing paper)			
Date:	April 21, 1999		(Signature of person malling paper)			

EXTENSION OF TERM

. Ine	proceedings nerein are for a	a patent application and the pro-	risions of 37 CPH 1.136 apply				
(a) [n extension of time under 37 CF number of months checked belo					
	Extension (months)	Fee for other than small entity	Fee for <u>small entity</u>				
	one month	\$110.00	\$55.00				
	two months	\$380.00	\$190.00				
	three months	\$870.00	\$435.00				
	four months	\$1,360,00	\$680.00				
	Fee \$						
[An extension for paid therefor of \$						
total months of extension now requested.							
Extension fee due with this request \$							
		OR					
(b) [(b) Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.						

FEE FOR CLAIMS

4.	(Col. 1)	ns (37 CFN	(Col. 2)		ol. 3)		L ENTITY	WII DCI	OTHER	R THAN A ENTITY
	CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NO. PREVIOUSL Y PAID FOR		EŞENT XTRA	RATE	ADDIT. FEE	OR	RATE	ADDIT. FEE
TOTAL	• 3	MINUS **	20	=	0	X9 =	\$		X18=	\$
INDEP.	• з	MINUS	5	=	0	X39 =	\$		X78=	\$
FIRS	T PRESENTATIO	N OF MULT	IPLE DEP. CL	AIM		+130=	\$		+260=	\$
(c)	x No addition	onal fee for	claims is req	uirec	ADDI	TOTAL IT. FEE	\$	OR	TOTAL ADDIT. FEE	\$
				(OR					
(d)	Total add	itional fee fo	or claims requ	uirec	1\$					
FEE PAYMENT										
5.	Attached	is a check i	n the sum of	\$_						
	Charge A	ccount No.				_ the s	um of \$ _			
	A duplica	te of this re	quest is attac	hed.	•					
			FEE	E DE	FICIEN	NCY				
6. A	uthorization to C	Charge Addi	tional Fees							
1	application to	nay be requ o Account N	ereby authoric ired by this p lo. <u>07-1250</u> of Allowance	apei	r and d	uring th	e entire pexcept the	enden s issue	ny addition acy of this e fee at or	
Reg. N	o. 27,043			((()	TA.	X DE CE	TTORNE	Sort-		
Tel. No	.: (650) 522-58	78		Tyr Gi 33	ax D. H pe or pr ilead S 3 Lake D. Addro	lensley int name ciences side Dri	of attorne , Inc. ive			